



LOUISIANA USED MOTOR VEHICLE COMMISSION  
3132 Valley Creek Drive  
Baton Rouge, Louisiana 70808  
MAIN# (225) 925-3870 FAX # (225) 925-3869  
[www.lumvc.louisiana.gov](http://www.lumvc.louisiana.gov)

## **USED DEALER LICENSE REQUIRMENTS - INITIAL**

***PLEASE READ ALL OF THIS INFORMATION CAREFULLY BEFORE COMPLETING AND SUBMITTING YOUR APPLICATION. INCOMPLETE OR INACCURATE INFORMATION WILL DELAY YOUR LICENSE. APPLICATIONS MAY BE HAND DELIVERED, BUT THAT WILL NOT SPEED UP THE PROCESS.***

In order to have a Louisiana Used Car Dealer's License, you must have an established place of business which means the place owned or leased and regularly occupied by a person, partnership, corporation, limited liability company, or other entity licensed for the principal purpose of selling used motor vehicles, crushing, or compacting used motor vehicles and selling the crushed or compacted vehicle for scrap, or engaging in the business of a dismantler and parts recycler, where the products for sale are displayed and offered for sale, and where the books and records required for the conduct of the business are maintained and kept.

### **APPLICATIONS**

- Complete and sign all applications.
- You may scan and return via email to the appropriate Administrative Coordinator (view website for email address). Payment should follow no later than 10 days.
- Each dealership must have at least one salesperson.
- **IMPORTANT:** You must submit an additional fee of \$35.00 for each applicant if they have been convicted or pled guilty to any crime other than a traffic violation within the past ten (10) years for a criminal history background check.

### **EDUCATIONAL TRAINING SEMINAR**

- Complete and return the attached Educational Training Seminar Registration Form
- You will be scheduled for next available date. Dates are available to view on website.
- One of the following must attend: Owner, general manager, office manager, title clerk, or salesperson

### **SURETY BOND**

***NOTICE: The surety bond must be on the form provided by our office or use the EXACT LANGUAGE contained in the form provided. Copies of completed forms are acceptable.***

The Surety Bond must have the following information:

- The amount of coverage must be either:
  - \$20,000 (if you sell 119 units or less in a twelve month period)
  - \$35,000 (if you sell 120 units or more in a twelve month period).
- The bond number must appear on the face of the bond
- The exact principal's ownership, trade name of business, and physical address
- Type of ownership must be marked
- Effective & Ending Date of Bond
- Must be held and firmly bound to, the State of Louisiana, through the Louisiana Used Motor Vehicle Commission.
- Must be in force throughout the license period
- Signature of the principal of the dealership and witness
- Signature of Surety and Witness
- Bond Company must have seal on form
- Power of Attorney must be attached

### **GARAGE LIABILITY INSURANCE**

The Acord Certificate of Liability Insurance must have the following information:

- Name of the insured
- Physical address of insured
- Name and address of the garage liability insurance company
- Name and address of the garage liability insurance agency
- Phone and fax number of the insurance agency
- Garage liability box must be marked
- Garage liability policy number
- Effective & expiration dates of the policy
- Minimum limits are \$55,000.00
- Certificate Holder must read: *Louisiana Used Motor Vehicle Commission, 3132 Valley Creek Drive, Baton Rouge, LA 70808*
- List all insured salespeople
- Must indicate correct symbols or indicate, "Any auto held for sale of trade".

### **RENTAL INSURANCE**

- **Rent with the Option to Purchase:**
  - Must secure Contingent Liability Insurance
  - Minimum limits of \$100,000/\$300,000/\$50,000
  - Must be placed, if available, through an insurance company licensed by and admitted in the state of Louisiana
  - Certificate holder must read: *Louisiana Used Motor Vehicle Commission, 3132 Valley Creek Drive, Baton Rouge, LA 70808*
- **Daily Rental:**
  - Must secure "Schedule Auto" Insurance
  - Minimum limits of \$15,000/\$30,000/\$25,000
  - Certificate holder must read: *Louisiana Used Motor Vehicle Commission, 3132 Valley Creek Drive, Baton Rouge, LA 70808*

### **ZONING VERIFICATION**

- This form must be completed by your local zoning authority
- You must comply with the local zoning laws or the municipal requirements
- If location is zoned, zoning code must be indicated

### **BUSINESS SIGN**

- Permanently affixed sign reading the exact trade name
- Sign must be placed in front of the business and clearly visible from the street or roadway
- Minimum size of 16 square feet (4'x4')

### **BUSINESS TELEPHONE**

- Installed at the place of business
- Must be a landline, no cellular phones
- Listed will Nationwide Directory Assistance (411)

### **RENTAL PURCHASE AGREEMENT (for Rent with the Option to Purchase)**

- Submit a blank copy of your Rental Purchase Agreement
- Must be made in clear and conspicuous language

- ❖ Applications are processed in the order received. Please allow approximately 14 business days for processing all applications.
- ❖ Licenses are valid from date issued or January 1<sup>st</sup> whichever is later and will expire December 31<sup>st</sup>.
- ❖ Once applications are submitted to this office, your applications will be processed or a sendback letter requesting additional documents will be sent. Please make sure to check your LUMVC email address daily as sendback letters will be sent using this method.
- ❖ A physical inspection will be conducted before licenses are issued.
- ❖ If you apply for multiple licenses for the same dealership and same location, you are allowed to use the same bond, business sign, business phone line, and zoning form.
- ❖ We encourage you to pay for your license online. If you choose not to complete and pay for your dealer license online, the dealer packets are available on our website at [www.lumvc.louisiana.gov](http://www.lumvc.louisiana.gov). You may remit all documents and payment to the *Louisiana Used Motor Vehicle Commission, 3132 Valley Creek Drive, Baton Rouge, LA 70808*.

Requirement Checklists	
<b><u>Used Dealer's License</u></b> <ol style="list-style-type: none"> <li>1. Completed Application</li> <li>2. Salesperson Application(s)</li> <li>3. Surety Bond</li> <li>4. Garage Liability Insurance</li> <li>5. Zoning Verification Form</li> <li>6. Picture of Sign</li> <li>7. Installed Business Phone</li> <li>8. Fees</li> </ol>	<b><u>Rent with the Option to Purchase License</u></b> <ol style="list-style-type: none"> <li>1. Completed Application</li> <li>2. Salesperson Application(s)</li> <li>3. Surety Bond</li> <li>4. Contingent Liability Insurance</li> <li>5. Zoning Verification Form</li> <li>6. Picture of Sign</li> <li>7. Installed Business Phone</li> <li>8. Copy of rental purchase agreement</li> <li>9. Fees</li> </ol>
<b><u>Crusher License</u></b> <ol style="list-style-type: none"> <li>1. Completed Application</li> <li>2. Salesperson Application(s)</li> <li>3. Zoning Verification Form</li> <li>4. Picture of Sign</li> <li>5. Installed Business Phone</li> <li>6. Fees</li> </ol>	<b><u>Automotive Dismantle &amp; Parts Recycler License</u></b> <ol style="list-style-type: none"> <li>1. Completed Application</li> <li>2. Salesperson Application(s)</li> <li>3. Zoning Verification Form</li> <li>4. Picture of Sign</li> <li>5. Installed Business Phone</li> <li>6. Fees</li> </ol>
<b><u>Daily Rental License</u></b> <ol style="list-style-type: none"> <li>1. Completed Application</li> <li>2. Salesperson Application(s)</li> <li>3. Surety Bond</li> <li>4. Rental Insurance – Scheduled Autos</li> <li>5. Zoning Verification Form</li> <li>6. Picture of Sign</li> <li>7. Installed Business Phone</li> <li>8. Fees</li> </ol>	<b><u>Auction License</u></b> <ol style="list-style-type: none"> <li>1. Completed Application</li> <li>2. Must have or apply for Used Dealer's License</li> <li>3. Salesperson Application(s)</li> <li>4. Surety Bond</li> <li>5. Garage Liability Insurance</li> <li>6. Zoning Verification Form</li> <li>7. Picture of Sign</li> <li>8. Installed Business Phone</li> <li>9. Fees</li> </ol>
<b><u>Used Parts &amp; Accessories License</u></b> <ol style="list-style-type: none"> <li>1. Completed Application</li> <li>2. Salesperson Application(s)</li> <li>3. Zoning Verification Form</li> <li>4. Picture of Sign</li> <li>5. Installed Business Phone</li> <li>6. Fees</li> </ol>	<b><u>Salesperson License</u></b> <ol style="list-style-type: none"> <li>1. Completed Salesperson Application</li> <li>2. Name added on certificate of insurance OR a written statement indicating you will not drive any vehicles on or off the lot.</li> <li>3. Fees</li> </ol>

Type of License	Application Fee	Term of License
Used Dealers License	\$400.00	2 years
Crusher License	\$400.00	2 years
Automotive Dismantler & Parts Recycling License	\$400.00	2 years
Rent with Option to Purchase License	\$400.00	2 years
Daily Rental License	\$400.00	2 years
Auction License	\$400.00	2 years
Used Parts & Accessories License	\$400.00	2 years
Salesperson License	\$25.00	1 year
Additional Location	\$200.00	2 years

**BE ADVISED THAT A RENEWAL APPLICATION PACKET IS NOT COMPLETE UNLESS ALL REQUIRED DOCUMENTS ARE COMPLETED, SUBMITTED, AND ALL FEES ARE PAID IN FULL.**

Please email any questions you may have to [info@lumvc.louisiana.gov](mailto:info@lumvc.louisiana.gov) or your Administrative Coordinator. You may also visit our website at [www.lumvc.louisiana.gov](http://www.lumvc.louisiana.gov) for additional information or forms.

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FOR OFFICE USE ONLY

Current License #

Current License #

R#

License #

Date Issued

**APPLICATION FOR DEALER LICENSE FOR YEAR 20\_\_ - \_\_**☐ **INITIAL** ☐ **RENEWAL**

PLEASE PRINT OR TYPE. Complete entire application and attach such documents as required. Any misrepresentation or omission of information shall be grounds for refusal to issue or revocation of a license.

**SECTION ONE: DEALERSHIP INFORMATION**

DEALERSHIP NAME			BUSINESS PHONE	
PHYSICAL ADDRESS	CITY	ZIPCODE	PARISH	
MAILING ADDRESS	CITY	ZIPCODE	PARISH	
EMAIL ADDRESS	OFFICE HOURS		DAYS	

**SECTION TWO: TYPE OF LICENSE(S) AND TYPE OF BUSINESS**

CHECK THE TYPE OF LICENSE YOU ARE APPLYING FOR. YOU MUST SUBMIT THE CORRECT AMOUNT FOR EACH LICENSE TYPE. EACH ADDITIONAL LICENSE TYPE REQUIRES AN ADDITIONAL FEE. CHECK EACH TYPE OF BUSINESS YOU PLAN ON OPERATING.

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|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> <b>USED DEALERS LICENSE (\$400.00 FEE)</b> <ul style="list-style-type: none"><li><input type="checkbox"/> USED CARS AND TRUCKS</li><li><input type="checkbox"/> USED BOATS</li><li><input type="checkbox"/> USED BOAT MOTORS</li><li><input type="checkbox"/> USED TRAILERS</li><li><input type="checkbox"/> USED MOTORCYCLES</li><li><input type="checkbox"/> USED MOTORHOMES</li><li><input type="checkbox"/> BROKER</li><li><input type="checkbox"/> USED ATV/OFF ROAD</li><li><input type="checkbox"/> BUSES/FIRETRUCKS/WRECKERS</li><li><input type="checkbox"/> AUCTION (\$400 FEE)<ul style="list-style-type: none"><li><input type="checkbox"/> PUBLIC</li><li><input type="checkbox"/> WHOLESALE (DEALER)</li><li><input type="checkbox"/> SALVAGE</li></ul></li><li><input type="checkbox"/> USED PARTS &amp; ACCESSORIES (\$400 FEE)</li><li><input type="checkbox"/> CRUSHER (\$400 FEE)</li><li><input type="checkbox"/> AUTOMOTIVE DISMANTLER &amp; PARTS RECYCLER (\$400 FEE)</li></ul> | <input type="checkbox"/> <b>DAILY RENTAL (\$400 FEE)</b> <ul style="list-style-type: none"><li><input type="checkbox"/> USED CARS AND TRUCKS</li><li><input type="checkbox"/> USED BOATS</li><li><input type="checkbox"/> USED BOAT MOTORS</li><li><input type="checkbox"/> USED TRAILERS</li><li><input type="checkbox"/> USED MOTORCYCLES</li><li><input type="checkbox"/> USED MOTORHOMES</li><li><input type="checkbox"/> BROKER</li><li><input type="checkbox"/> USED ATV/OFF ROAD</li><li><input type="checkbox"/> RENT WITH THE OPTION TO PURCHASE (\$400 FEE)<ul style="list-style-type: none"><li><input type="checkbox"/> USED CARS AND TRUCKS</li><li><input type="checkbox"/> USED BOATS</li><li><input type="checkbox"/> USED BOAT MOTORS</li><li><input type="checkbox"/> USED TRAILERS</li><li><input type="checkbox"/> USED MOTORCYCLES</li><li><input type="checkbox"/> USED MOTORHOMES</li><li><input type="checkbox"/> BROKER</li><li><input type="checkbox"/> USED ATV/OFF ROAD</li></ul></li></ul> |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

**SECTION THREE: TYPE OF OWNERSHIP**

CHECK ONLY ONE

- |                                          |                                                   |                                                              |
|------------------------------------------|---------------------------------------------------|--------------------------------------------------------------|
| <input type="checkbox"/> SOLE PROPRIETOR | <input type="checkbox"/> CORPORATION (CORP)       | <input type="checkbox"/> LIMITED LIABILITY COMPANY (LLC)     |
| <input type="checkbox"/> PARTNERSHIP     | <input type="checkbox"/> LIMITED PARTNERSHIP (LP) | <input type="checkbox"/> LIMITED LIABILITY PARTNERSHIP (LLP) |

ENTITY NAME (IF APPLICABLE) \_\_\_\_\_

**SECTION FOUR: OWNERSHIP INFORMATION**

COMPLETE THE FOLLOWING SECTION INDICATING ALL PARTIES WITH ANY OWNERSHIP INTEREST IN THE BUSINESS. YOU MAY INCLUDE ADDITIONAL SHEETS IF NECESSARY.

NAME OF PERSON	DATE OF BIRTH mm/dd/yyyy	SOCIAL SECURITY #
HOME ADDRESS	TELEPHONE	DRIVER'S LICENSE #
U.S. CITIZEN? YES NO (IF NO, ATTACH COPY OF RESIDENT ALIEN CARD (FRONT & BACK) AND DRIVER'S LICENSE		
NAME OF PERSON	DATE OF BIRTH mm/dd/yyyy	SOCIAL SECURITY #
HOME ADDRESS	TELEPHONE	DRIVER'S LICENSE #
U.S. CITIZEN? YES NO (IF NO, ATTACH COPY OF RESIDENT ALIEN CARD (FRONT & BACK) AND DRIVER'S LICENSE		

**SECTION FIVE: BACKGROUND INFORMATION**

HAVE ANY OF THE APPLICANTS LISTED IN SECTION FOUR EVER BEEN CONVICTED OR PLED GUILTY TO ANY CRIME OTHER THAN A TRAFFIC VIOLATION WITHIN THE PAST TEN (10) YEARS?

- ☐ YES  
☐ NO

IF YES, COMPLETE THE FOLLOWING (ATTACH ADDITIONAL SHEET IF NEEDED)

INDIVIDUAL NAME: \_\_\_\_\_ DATE OF CONVICTION \_\_\_\_\_ OFFENSE \_\_\_\_\_

INDIVIDUAL NAME: \_\_\_\_\_ DATE OF CONVICTION \_\_\_\_\_ OFFENSE \_\_\_\_\_

INDIVIDUAL NAME: \_\_\_\_\_ DATE OF CONVICTION \_\_\_\_\_ OFFENSE \_\_\_\_\_

**SECTION SIX: GENERAL INFORMATION**

1. **HAVE YOU OR ANY AFFILIATED OWNERS EVER BEEN KNOWN BY AND/OR USED ANY NAME(S) OTHER THAN THE NAME(S) APPEARING ON THIS APPLICATION?**  
☐ YES; IF YES, GIVE NAMES. \_\_\_\_\_  
☐ NO
2. **HAVE YOU OR ANY AFFILIATED OWNERS EVER BEEN LICENSED AS A DEALER OR SALES PERSON IN LOUISIANA?**  
☐ YES; IF YES, GIVE NAME, DEALERSHIP NAME, AND DATE: \_\_\_\_\_  
☐ NO
3. **HAVE YOU OR ANY AFFILIATED OWNERS EVER HAD A PREVIOUS DEALER OR SALES PERSON LICENSE THAT WAS DENIED, SUSPENDED, OR REVOKED?**  
☐ YES; IF YES, GIVE NAME, DEALERSHIP NAME, AND DATE: \_\_\_\_\_  
☐ NO
4. **ARE YOU OR ANY AFFILIATED OWNERS RELATED TO ANYONE FROM THE USED CAR INDUSTRY WHOSE LICENSE HAS BEEN DENIED, SUSPENDED, OR REVOKED?**  
☐ YES; IF YES, GIVE NAME AND THEIR DEALERSHIP NAME: \_\_\_\_\_  
☐ NO
5. **DO YOU PRESENTLY SELL EXTENDED WARRANTY CONTRACTS OR PRODUCT WARRANTIES?**  
☐ YES; IF YES, NAME OF COMPANY: \_\_\_\_\_ DATE OF APPROVAL: \_\_\_\_\_  
☐ NO
6. **DO YOU HOLD A FINANCE LICENSE?**  
☐ YES; IF YES, GIVE NAME: \_\_\_\_\_ FINANCE NUMBER: \_\_\_\_\_  
☐ NO
7. **HAS A REPRESENTATIVE OF THE DEALERSHIP COMPLETED THE 4 HOUR EDUCATIONAL SEMINAR?**  
☐ YES; IF YES, GIVE DATE: \_\_\_\_\_  
☐ NO; IS REPRESENTATIVE SCHEDULED FOR SEMINAR? GIVE DATE: \_\_\_\_\_
8. **DATE THIS BUSINESS WAS ESTABLISHED:** \_\_\_\_\_

**ATTESTATION**

I HEREBY CERTIFY THAT THE STATEMENTS MADE HEREIN ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF THAT I AM FAMILIAR AND WILL ABIDE WITH THE PROVISIONS OF ALL THE LAWS, RULES AND REGULATIONS UNDER WHICH THIS APPLICATION IS MADE.

ANY FALSE ANSWER IS A CRIMINAL OFFENSE SUBJECT TO A FINE NOT TO EXCEED \$5,000.00 OR IMPRISONMENT NOT TO EXCEED 4 YEARS OR BOTH.

\_\_\_\_\_  
PRINT NAME

\_\_\_\_\_  
SIGNATURE AND TITLE

\_\_\_\_\_  
DATE mm/dd/yyyy

PURSUANT TO THE AMERICANS WITH DISABILITIES ACT, ASSISTANCE WILL BE PROVIDED IN COMPLETING ANY FORMS REQUIRED BY THE LOUISIANA USED MOTOR VEHICLE COMMISSION.

**LOUISIANA USED MOTOR VEHICLE COMMISSION**

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FOR OFFICE USE ONLY

Current License #

R#
Dealer #
SM #
Date Issued

**APPLICATION FOR SALESPERSON'S LICENSE FOR YEAR 20**☐**INITIAL**☐**RENEWAL**

PLEASE PRINT OR TYPE. Complete entire application and attach such documents as required. Any misrepresentation or omission of information shall be grounds for refusal to issue or revocation of a Salesperson License. **SALESPERSON LICENSE FEE IS \$25.00.**

**SECTION ONE: INDIVIDUAL INFORMATION**

LAST NAME		FIRST NAME		MI	SOCIAL SECURITY #	
RESIDENCE ADDRESS		CITY	STATE	ZIPCODE		DATE OF BIRTH mm/dd/yyyy
HOME TELEPHONE	CELLULAR PHONE	EMPLOYMENT DATE	DRIVER'S LICENSE #		RACE	GENDER
U.S. CITIZEN? <input type="checkbox"/> YES <input type="checkbox"/> NO IF NO, ATTACH COPY OF RESIDENT ALIEN CARD (FRONT AND BACK) AND DRIVER'S LICENSE.						

**SECTION TWO: DEALERSHIP INFORMATION**

DEALERSHIP NAME	DEALERSHIP ADDRESS	CITY	ZIPCODE
DEALER LICENSE #	TELEPHONE	PARISH	

**SECTION THREE: GENERAL INFORMATION**

- HAVE YOU EVER APPLIED FOR A SALESPERSON LICENSE THAT WAS DENIED?  
☐ YES; IF YES, GIVE DATE(S): \_\_\_\_\_  
☐ NO
- HAVE YOU EVER HELD A DEALER OR SALESPERSON LICENSE THAT WAS DENIED, SUPSENDED, OR REVOKED?  
☐ YES; IF YES, GIVE DEALERSHIP NAME AND DATE: \_\_\_\_\_  
☐ NO
- ARE YOU RELATED TO ANYONE FROM THE USED CAR INDUSTRY WHOSE LICENSE HAS BEEN DENIED, SUSPENDED, OR REVOKED?  
☐ YES; IF YES, GIVE NAME(S): \_\_\_\_\_  
☐ NO
- HAVE YOU EVER ATTENDED THE 4 HOUR EDUCATIONAL SEMINAR?  
☐ YES; IF YES, GIVE DATE: \_\_\_\_\_  
☐ NO
- ARE YOU GOING TO DRIVE ANY OF THE VEHICLES ON OR OFF THE LOT?  
☐ YES  
☐ NO

**SECTION FOUR: EMPLOYMENT HISTORY**

HAVE YOU EVER HAD A PREVIOUS DEALER OR SALESPERSON LICENSE?

- ☐ YES; IF YES, COMPLETE THE FOLLOWING:  
☐ NO

NAME OF DEALERSHIP	DEALERSHP ADDRESS	DATES OF LICENSE

**SECTION FIVE: BACKGROUND HISTORY**

HAVE YOU EVER BEEN CONVICTED OR PLED GUILTY TO ANY CRIME OTHER THAN A TRAFFIC VIOLATION WITHIN THE PAST TEN (10) YEARS?

- ☐ YES; IF YES, DATE OF CONVICTION \_\_\_\_\_ OFFENSE \_\_\_\_\_
- ☐ NO

**NOTE: IF YES, YOU MUST SUBMIT AN ADDITIONAL FEE OF \$35.00 FOR A CRIMINAL BACKGROUND CHECK.**

**ATTESTATION**

I HEREBY CERTIFY THAT THE STATEMENTS MADE HEREIN ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF THAT I AM FAMILIAR AND WILL ABIDE WITH THE PROVISIONS OF ALL THE LAWS, RULES AND REGULATIONS UNDER WHICH THIS APPLICATION IS MADE.

ANY FALSE ANSWER IS A CRIMINAL OFFENSE SUBJECT TO A FINE NOT TO EXCEED \$5,000.00 OR IMPRISONMENT NOT TO EXCEED 4 YEARS OR BOTH.

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
DATE mm/dd/yyyy

\_\_\_\_\_  
SIGNATURE OF OWNER

\_\_\_\_\_  
DATE

**PURSUANT TO THE AMERICANS WITH DISABILITIES ACT, ASSISTANCE WILL BE PROVIDED IN COMPLETING ANY FORMS REQUIRED BY THE LOUISIANA USED MOTOR VEHICLE COMMISSION.**



STATE OF LOUISIANA  
LOUISIANA USED MOTOR VEHICLE COMMISSION  
3132 VALLEY CREEK DR.  
BATON ROUGE, LOUISIANA 70808  
(225) 925-3870, FAX (225) 925-3869  
www.lumvc.louisiana.gov

BOND FOR VEHICLE DEALERS BOND NO. \_\_\_\_\_

PRINCIPAL	OWNERSHIP (Name of Individual, Partners, Corporation—an individual cannot do business as a corporation, LLC, or LLP)
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TRADE NAME OF BUSINESS (Must read exactly the same as on application and picture.)

PHYSICAL LOCATION OF BUSINESS (No. Street, Town/City, Zip Code—Do not put mailing address.)

OWNERSHIP	IF CORPORATE, LLP OR LLC, SHOW STATE OF DOMICILE
<input type="checkbox"/> Individual <input type="checkbox"/> Partnership <input type="checkbox"/> Corporate <input type="checkbox"/> LLP <input type="checkbox"/> LLC	

Amount of Bond    ☐ \$20,000.00 (if you sell 119 units or less within a twelve month period)  
Amount of Bond    ☐ \$35,000.00 (if you sell 120 units or more within a twelve month period)

Parish of \_\_\_\_\_, State of Louisiana, as principal (hereinafter called principal), AND

SURETY: \_\_\_\_\_  
(Name of Surety)

\_\_\_\_\_  
(Home Office Address of Surety)

(hereinafter called Surety), are held and firmly bound unto, the State of Louisiana, through the **Louisiana Used Motor Vehicle Commission**, or its successor in office, in the sum of \$20,000.00 or \$35,000.00 for the payment of which, well and truly to be made, we bind ourselves, our heirs, executors, administrators and assigns, jointly and severally, firmly by these presents.

The condition of the above obligation is such that:

WHEREAS, the above named principal has made to the obligee hereunder application for a license, under Chapter 4 of Title 32 of the Louisiana Revised Statutes of 1950 to engage in business as a Vehicle Dealer as defined by the various sections of Chapter 4 of Title 32 of the Louisiana Revised Statutes of 1950 as amended.

WHEREAS, the above named principal is required as a condition precedent to his appointment as such dealer to deliver annually to the obligee hereto a good and sufficient surety bond for the license period for the payment of all loss, damages and expenses that may be occasioned by reason of the failure to conform to any law relating to the proper disposition of license, tags, or title and shall also indemnify any person who suffers any loss by reason of a failure to observe the provisions of the law relating to sales tax, license, tags, or title and shall also indemnify any person who suffers any loss, damages, and expenses by reason of a failure to deliver title and for the proper disposition of all taxes, licenses, and registration fees, and including, but not limited to laws relating to penalties and hearing costs as assessed by and on behalf of the Used Motor Vehicle Commission.

NOW THEREFORE, if the above named principal shall pay or cause to be paid to any person who suffered any loss by reason of a failure to observe the provisions of the law relating to sales tax, license, tags, title, registration fees, for the failure to deliver title, or for penalties and hearing costs as assessed by and on behalf of the Used Motor Vehicle Commission then this obligation shall be void, otherwise to remain in full force and effect.

The bond becomes effective as of \_\_\_\_\_, 20\_\_\_\_\_, in support of a license issued for the term ending December 31, 20\_\_\_\_\_ and may be continued by certificate each year in support of any license issued for any subsequent year.

Provided, however, that the aggregate liability of the surety hereunder shall in no event, in any one year exceed the sum of such bond.

Provided, further, the surety shall have the right to terminate its liability hereunder by serving written notice of its election so to do, by United States registered mail, upon the Commission and upon the principal, and thereupon the surety shall be discharged from any future liability hereunder for any default of the principal, after the expiration of thirty days from and after service of such notice.

IN FAITH WHEREOF, we have signed these presents at the place and on the date hereinafter indicated.

WITNESSES	PRINCIPAL (Name of Dealer)
	SIGNED BY _____ TITLE _____
SIGNED AT (City, State)	DATE _____
WITNESSES	SURETY (Name of Surety)
	SIGNED BY _____
SIGNED AT (City, State)	DATE _____
COUNTERSIGNATURE (LA Res. Agent, If Necessary)	

\*ORIGINAL POWER OF ATTORNEY MUST BE ATTACHED FOR SURETY SIGNATURE.



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## ZONING VERIFICATION

(Please print or type)

We hereby verify that the property located at:

\_\_\_\_\_  
(Physical address as listed on application)

\_\_\_\_\_  
(City)

\_\_\_\_\_  
(State)

\_\_\_\_\_  
(Parish)

\_\_\_\_\_  
(Zip)

Upon which \_\_\_\_\_ is Situated,  
(Name of business)

### **Check One:**

- ( ) Is Zoned; Zoning Code: \_\_\_\_\_  
( ) Is NOT Zoned

This is permissible and proper for the operation of:

### **Check which Applies:**

- ( ) A Used Motor Vehicle Dealer  
( ) A Automotive Dismantler and Parts Recycler  
( ) A Motor Vehicle Crusher  
( ) A Used Parts Dealer

\_\_\_\_\_  
Print Zoning Authority Name

\_\_\_\_\_  
Official Title

\_\_\_\_\_  
Zoning Authority Signature

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Date

\*Pursuant to the Americans with Disabilities Act, assistance will be provided on completing any form required by the Louisiana Used Motor Vehicle Commission.



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## EDUCATIONAL TRAINING SEMINAR REGISTRATION

(Please print or type)

**IMPORTANT:** A separate registration form must be completed for each person attending.

1. Trade Name of Business: \_\_\_\_\_
2. Ownership: \_\_\_\_\_
3. Dealer Number (If Applicable): \_\_\_\_\_
4. Physical Address: \_\_\_\_\_  
(Street) (City) (Parish) (Zip)
5. Mailing Address: \_\_\_\_\_  
(If different from Physical) (Street/P.O. Box) (City) (Parish) (Zip)
6. Business Phone #: \_\_\_\_\_ Mobile Phone #: \_\_\_\_\_
7. Fax #: \_\_\_\_\_ Email Address: \_\_\_\_\_
8. Person Attending:  
  
\_\_\_\_\_  
Name Title

(Do not write below this line)  
FOR OFFICE USE ONLY

Course Completed: Yes \_\_\_\_ No \_\_\_\_

Certificate Issued: Date: \_\_\_\_\_

Certificate Number: \_\_\_\_\_